SURPLUS LINES LICENSEE'S TAX REPORT - APPENDIX 3

P.O. BOX 4001 JEFFERSON CITY, MO 65102

Under provisions of the Mis	souri S	Surplus Lines Law, Chapter 384	, RSMo as amended,	this report is for the twelve	ve (12) month period
ending December 31,		, for insurance placed in compa	nies not admitted to d	lo business in the State of	Missouri. This report
		the year next succeeding the year			
				·	
NAME (LAST, FIRST, MIDDLE)					
ADDRESS (STREET, CITY, STATE, ZIP)					
RISK NUMBER		NAME AND ADDRESS	S OF INSURED	DEBIT	CREDIT
KISK NOWIBER		NAME AND ADDRESS	3 OF INSURED	DEBIT	CREDIT
		TOTALO			
		TOTALS			
		NET PREMI	UMS (TOTAL DEBITS	LESS CREDITS)	
		TAX DUE O	N NET PREMIUMS (5	5%)	
MUST BE SIGNED IN PRESENCE OF NOTARY	SURPL	US LINES LICENSEE'S SIGNATURE			
NOTARY PUBLIC EMBOSSER SEAL	STATE	OF	COUNTY (OR CITY OF ST. LOUIS)	
	CLIDOO	DIDED AND SMORN REFORE ME. THIS			
	SORSC	RIBED AND SWORN BEFORE ME, THIS DAY OF	YEAR	USE RUBBER STAMP IN CLEAR AREA BELOW.	
	NOTARY PUBLIC SIGNATURE MY C		MY COMMISSION	JOE ROBBER OTAMI III	CLERK AKEA BELOW.
			EXPIRES		
	NOTAR	Y PUBLIC NAME (TYPED OR PRINTED)			
NOTANT TODGE NAME (TIPED ON FINITED)					